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FAX TRANSMISSION**DATE:** September 8, 2005**PTO IDENTIFIER:** Application Number 09/851832-Conf. #3937

Patent Number

Inventor: Julian S. TAYLOR**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** LAHIVE & COCKFIELD, LLP

Kevin J. Canning

PHONE: (617) 227-7400**Attorney Dkt. #:** SMQ-118RCE/P6144**PAGES (Including Cover Sheet):** 22**CONTENTS:** Amendment (14 pages)
Fee Transmittal (1 page in duplicate)
Two Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page in duplicate)
Request for Continued Examination Transmittal (1 page in duplicate)
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Certificate of Transmission (1 page)

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PTO/59/97 (09-04)

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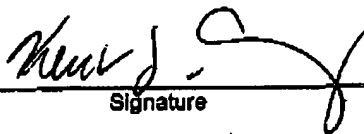
Application No. (if known): 09/851832

Attorney Docket No.: SMQ-118RCE

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Date



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Amendment (14 pages)

Fee Transmittal (1 page in duplicate)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4318). FEE TRANSMITTAL For FY 2005		Complete if Known Application Number 09/851832-Conf. #3837 Filing Date May 9, 2001 First Named Inventor Julian S. TAYLOR Examiner Name A. Khatri Art Unit 2193 Attorney Docket No. SMQ-118RCE/P6144	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$) 1,240.00			

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP

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☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.18 and 1.17 ☒ Credit any overpayments

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
54	- 34 =	x				
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
6	- 6 =	x				

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/50 (round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1252 Extension for response within second month	450.00
1801 Request for continued examination (RCE) (see 37 ...)	790.00

SUBMITTED BY		Registration No. 35,470	Telephone (817) 227-7400
Signature		(Attorney/Agent)	Date September 8, 2005
Name (Print/Type)	Kevin J. Canning		

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Dated: September 8, 2005

Signature: (Kevin J. Canning)